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PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/734,979
	Filing Date	12/10/2003
	First Named Inventor	Campbell et al.
	Art Unit	1762
	Examiner Name	Turocy
Total Number of Pages in This Submission	Attorney Docket Number	0906S-000339 (IN-5567)

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): RETURN POSTCARD		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 23-3425. A duplicate copy of this sheet is enclosed.</td></tr></table>			Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 23-3425. A duplicate copy of this sheet is enclosed.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Anna M. Budde	Reg. No. 35,085
Signature	<i>Anna M Budde</i>		
Date	December 27, 2005		

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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NOTICE OF APPEAL TO THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCESDocket Number (Optional)
0906S-000339 (IN-5567)

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Signature _____

Typed or printed
name ANNA M. BUDDEIn re Application of
Donald H. CampbellApplication Number
10/734,979Filed
12/15/2003For BLOCKED ISOCYANATES FOR CLEARCOATS WITHOUT
USAGE RESTRICTIONSArt Unit
1762Examiner
TurocyApplicant hereby **appeals** to the Board of Patent Appeals and Interferences from the decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 500.☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ ____.

☐ A check in the amount of the fee is enclosed.

12/30/2005 BABRAHA1 00000087 233425 10734979

☐ Payment by credit card. Form PTO-2038 is attached.

01 FC:1401 500.00 DA

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

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☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 23-3425. I have enclosed a duplicate copy of this sheet.☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

☐ applicant/inventor.☐ assignee of record of the entire interest.See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)☒ attorney or agent of record.Registration number 35,085☐ attorney or agent acting under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. ____.

Anna M Budde

Signature

Anna M. Budde

Typed or printed name

(248) 641-1600

Telephone number

December 27, 2005

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of ____ forms are submitted.

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